

Candidate Intention Statement

Date Stamp
CALIFORNIA
FORM
501

For Official Use Only

Check One: ☒ Initial

☐ Amendment (Explain) _____

RECEIVED

1. Candidate Information:

NAME OF CANDIDATE (Last, First Middle Initial)

Andrew Narong Janz

DAYTIME TELEPHONE NUMBER

(810) 844-6796

2019 APR 26 P 12:21
FAX NUMBER (optional)

EMAIL (optional)

STREET ADDRESS

CITY

CITY OF FRESNO
CITY CLERK'S OFFICE
CA

ZIP CODE

Fresno

CA

93711

OFFICE SOUGHT (POSITION TITLE)

AGENCY NAME

Mayor

City of Fresno

DISTRICT NUMBER, if applicable

☒ NON-PARTISAN OFFICE

OFFICE JURISDICTION

☐ State (Complete Part 2.)

☒ City

☐ County

☐ Multi-County:

City of Fresno

(Name of Multi-County Jurisdiction)

2020

(Year of Election)

PARTY PREFERENCE:

(Check one box, if applicable.)

☒ PRIMARY / GENERAL

☐ SPECIAL / RUNOFF

2. State Candidate Expenditure Limit Statement:

(CalPERS and CalSTRS candidates, judges, judicial candidates, and candidates for local offices do not complete Part 2.)

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on: ____/____/____ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On ____/____/____, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

04/24/2019

(month, day, year)

Signature

d correct.

FPCC Form 501 (August/2018)

FPCC Advice: advice@fpcc.ca.gov (866/275-3772)

www.fpcc.ca.gov